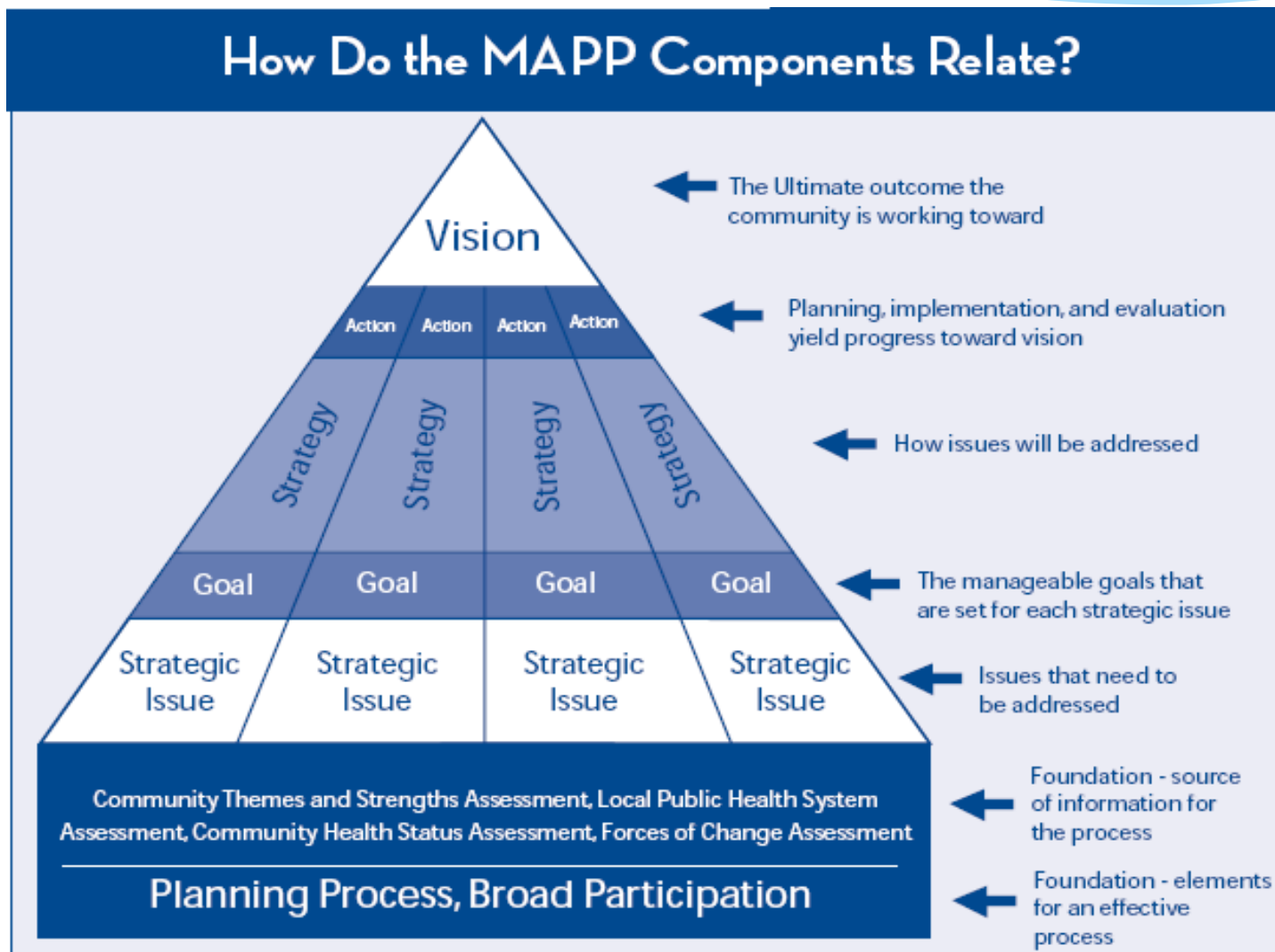# MAPP Community Health Assessment Meeting

July 16, 2015

VISION: A thriving community where all people are safe and healthy.

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Priority Issues Scoring Criteria

One-thirds weight:

1. Magnitude of the problem
2. Comparison with State (National) Results
3. Historical Trends

One-third weight: 4. Economic/Social Impact

One-third weight:

5. Changeability at the local level
6. Capacity of the Local Health System
7. Readiness/Political Will

Today's Agenda: Selecting High Priority Issues

* There are many possible health issues that we have looked at and others we could include.

* Today, based on a set of criteria for scoring you will be asked to rate selected health issues on four criteria:

    * Economic/Social Impact

    * Changeability

    * Capacity of the local public health system

    * Readiness/political will

Scoring Data:
1 Magnitude (Size) of the Problem

* 1= 0-4 % of population (or a rate of < 25 per 100,000);

* 2= 5-9 % of population (or a rate of 25-49 per 100,000);

* 3= 10-14 % of population (or a rate of 50-99 per 100,000);

* 4= 15-24 % of population (or a rate of 100-149 per 100,000);

* 5 = 25+ % of population (or a rate of > 25 150 per 100,000).

Scoring Data:
2 Comparison with State (National) Results

* 1= Significantly better than state results;

* 2= Slightly better than state results;

* 3= Same as state results;

* 4= Slightly worse than state results;

* 5= Significantly worse than state results.

Scoring Data:
3 Historical Trends

* 1= Significant improvement over the past five to ten years;

* 2= Some improvement over the past five to ten years;

* 3= Stable over the past five to ten years;

* 4= Some deterioration (worsening) over the past five to ten years;

* 5= Rapid deterioration (worsening) over the past five to ten years.

Scoring:
4 Economic/Social Impact

* 1 = low impact on productivity, health care expenditures, academic performance, crime and arrest rates, and overall population health
* 2 = below average impact on productivity, health care expenditures, academic performance, crime and arrest rates, and overall population health
* 3 = average impact on productivity, health care expenditures, academic performance, crime and arrest rates, and overall population health
* 4 = above average impact on productivity, health care expenditures, academic performance, crime and arrest rates, and overall population health
* 5 = high impact on productivity, health care expenditures, academic performance, crime and arrest rates, and overall population health

Scoring:
5 Changeability

* 1 = very unlikely that the issue can be changed at the LHD level through evidence-based programs, policies, and practices

* 2 = somewhat unlikely that the issue can be changed at the LHD level through evidence-based programs, policies, and practices

* 3 = neither unlikely nor likely that the issue can be changed at the LHD level through evidence-based programs, policies, and practices

* 4 = somewhat likely that the issue can be changed at the LHD level through evidence-based programs, policies, and practices

* 5 = very likely that the issue can be changed at the LHD level through evidence-based programs, policies, and practices

Scoring:
6 Capacity of the Local Health System

* 1 = there is very little capacity and willingness among local public health system stakeholders to move forward on this issue

* 2 = there is little capacity and willingness among local public health system stakeholders to move forward on this issue

* 3 = there is a moderate amount of capacity and willingness among local public health system stakeholders to move forward on this issue

* 4 = there is strong capacity and willingness among local public health system stakeholders to move forward on this issue

* 5 = there is very strong capacity and willingness among local public health system stakeholders to move forward on this issue

Scoring:
7 Readiness/Political Will

* 1 = there is very little willingness among state and community leaders and advocates to move forward on this issue

* 2 = there is little willingness among state and community leaders and advocates to move forward on this issue

* 3 = there is a moderate amount of willingness among state and community leaders and advocates to move forward on this issue

* 4 = there is strong willingness among state and community leaders and advocates to move forward on this issue

* 5 = there is very strong willingness among state and community leaders and advocates to move forward on this issue

Population Data, County and City

* 2014 estimated population for Lancaster County is 301,795; 2013 = 297,285 (2010 Census = 285,407)

* Lincoln's Population is estimated at 272,996 for 2014; 268,955, 2013 (2010 Census = 258,379)

Population Data, Age Groups

* Rough population sizes by age group:
  * Under 5: 22,000
  * 18 and over: 225,000
    18 to 64: 200,000
  * 20 to 24: 33,000
  * 25 to 34: 45,000
  * 65 and older: 34,000
  * 85 and older: 5,000

Population, Race/Ethnicity

* American Community Survey 2009-2013 Estimates:
* Total Population: 289,873
* Hispanic or Latino (of any race): 17,513
* Not Hispanic: 272,360
    * White alone: 243,529
    * Black or African American alone: 10,501
    * American Indian/Alaskan Native alone: 1,578
    * Asian alone: 10,746
    * Two or more races: 5,671

Healthy People 2020

http://www.healthypeople.gov/sites/default/files/LHI-ProgressReport-ExecSum_0.pdf

Healthy People 2020 Leading Health Indicators

Access to Care	Goal	Data Source	Status
Persons with medical insurance	100%	NHIS	NC
Persons with a usual primary care provider	83.9%	NHIS	NC

Clinical Preventive Services	Goal	Data Source	Status
Adults who receive a colorectal cancer screening based on the most recent guidelines	70.5%	NHIS	Positive
Adults with hypertension whose blood pressure is under control	61.2%	NHANES	Positive
Persons with diagnosed diabetes whose A1C value is >9 percent	16.1%	NHANES	NC
Children aged 19 to 35 months who receive the recommended doses of DtaP, polio, MMR, Hib, hepatitis B, varicella, and PCV vaccines	80.0%	NIS	Positive

Environmental Quality	Goal	Data Source	Status
Air Quality Index (AQI) exceeding 100	1.252*	AQS	Met
Children exposed to secondhand smoke	47.0%	NHANES	Met

Healthy People 2020 Leading Health Indicators

Injury and Violence	Goal	Data Source	Status
Fatal injuries	53.7/100,000 AAR	NVSS-M	Positive
Homicides	5.5/100,000	NVSS-M	Met

Maternal, Infant, and Child Health	Goal	Data Source	Status
All Infant Deaths	6.0/1,000 live births	LB/IDDS	Positive
Total peterm live births	11.4%	NVSS-N	Positive

Mental Health	Goal	Data Source	Status
Suicides	10.2/100,000	NVSS-M	Negative
Adolescents who experience major depressive episodes	75.0%	NSDUH	Negative

Nutrition, Physical Activity, and Obesity	Goal	Data Source	Status
Adults who meet current Federal physical activity quidelines for aerobic, physical activity and muscle strengthening activity	20.1%	NHIS	Met
Adults who are obese	30.5%	NHANES	NC
Obesity among children and adolescents	14.5%	NHANES	NC
Total vegetable intake for persons aged 2 years and older	1.14 cups per 1000 calories	NHANES	NC

Healthy People 2020 Leading Health Indicators

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Total vegetable intake for persons aged 2 years and older	1.14 cups per 1000 calories	NHANES	NC

Healthy People 2020 Leading Health Indicators

Oral Health	Goal	Data Source	Status
Children Adolescents, and adults who visited the dentist in the past year	49.0%	MEPS	Negative

Reproductive and Sexual Health	Goal	Data Source	Status
Sexually active females aged 15 to 44 who received reproductive health services in the past 12 months	86.5%	NSFG	NA
Knowledge of serostatus among HIV-positive persons	90.0%	NHSS	Positive

Social Determinants	Goal	Data Source	Status
Students who graduate with a regular diploma 4 years after starting 9th grade	82.4%	CCD	Positive

Substance Abuse	Goal	Data Source	Status
Adolescents using alcohol or any illicit drugs during the past 30 days	16.6%	NSDUH	Positive
Adults engaging in binge drinking during the past 30 days	24.4%	NSDUH	NC

Tobacco	Goal	Data Source	Status
Adults who are current cigarette smokers	12.0%	NHIS	Positive
Adolescents who smoked cigarettes in the past 30 days	16.0%	YRBSS	NC

MAPP Process Illustration

Community Themes &
Strengths Assessment

Organize
for Success

Partnership
Development

Visioning

Four MAPP Assessments

Identify Strategic Issues

Formulate Goals and Strategies

Forces of Change
Assessment

Local Public Health
System Assessment

Evaluate

Plan

Action

Implement

Community Health
Status Assessment
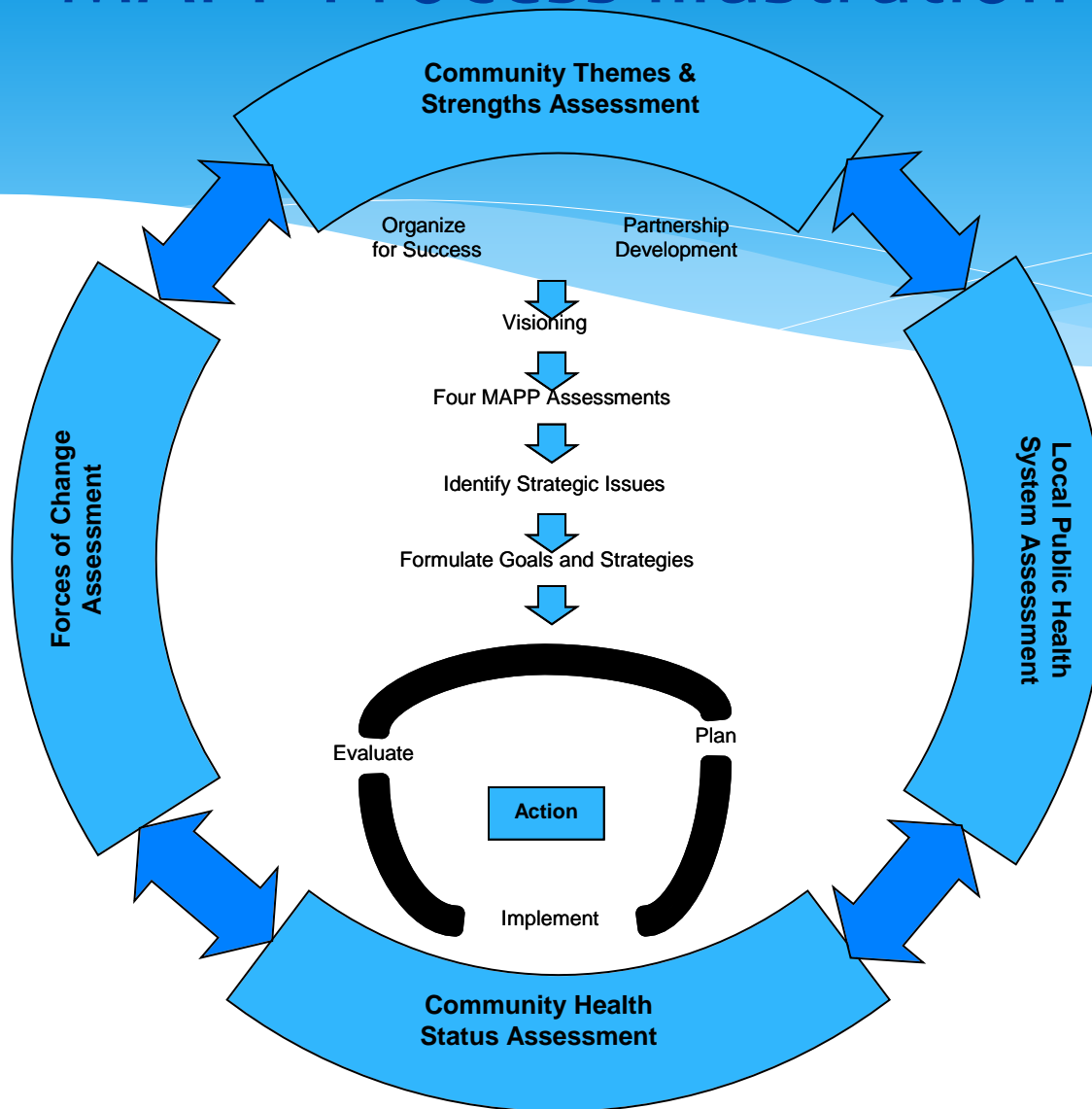
VISION: A thriving community where all people are safe and healthy.

Health Disparities

* There are a number of health disparities by gender, by race/ethnicity, by age, geographically, by education and by income groups.

* Certain disparities will be discussed in the community profile after the assessments are completed.

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Finding the Surveys and MAPP Information

Locating MAPP Information

Community Health Assessment (MAPP) Information

Community Themes and Strengths Surveys

English Version

Spanish Version

Communicable Disease

Epidemiology

Geographic Information Systems

Mobilizing for Action through Planning & Partnerships

Public Health Emergency Planning

Data & Reports

As one of our public health functions the Lincoln-Lancaster County Health Department routinely assesses the health status in the community. We do so to analyze trends, inform and educate ourselves and our partners, target services and evaluate the progress of our many programs.

In addition to this ongoing, routine assessment, every three to five-years we engage in a much broader community health assessment. The last time we conducted a comprehensive community health assessment utilizing the MAPP (Mobilizing for Action through Planning and Partnerships) model from the National Association of City and County Health Organizations (NACCHO) was in 2010-2011. Currently, the Health Department is once again engaging our partners and the community in a macro look at health sta...

process b...

the comm...

City of Lincoln
Health Department
Health Data & Evaluation

Steve Frederick,
Manager
sfrederick@lincoln.ne.gov

3140 N St
Lincoln, NE, 68510 USA

Tel   402-441-8094
Fax   402-441-4607

Download vCard

Health Department Directory

ACTION Center Service

Documents

- June 25, 2015 Meeting PowerPoint PDF
- April 23, 2015 Meeting PowerPoint PDF
- May 21, 2015 Meeting PowerPoint PDF
- MAPP Vision, Vision Priorities and Guiding Principles PDF

Links:

- Community Public Health System Survey
- County Health Rankings
- Vital Statistics Portal
- Behavioral Risk Factor Surveillance Portal
- Youth Risk Behavior Portal
- BRFSS 2011-2013 LLCHD Detailed Table
- Lancaster County Community Health Improvement Plan (2013)

CT&S Focus Group Questions

* "How would you describe Lincoln to a friend or family member who had never been here?"

* What do you view as strengths of Lincoln as a community?

* In your family or your friends' families, what are the biggest concerns.

* How would you describe the interactions between Lincoln's community members from different backgrounds?

* What are some of the things that you see as lacking in Lincoln?

* If a task force was being formed to improve things in your community, what topics do you think they would need to address and why?

LINCOLN LANCASTER COUNTY
HEALTH DEPARTMENT

Forces of Change Assessment

The Forces of Change Assessment answers questions such as:

* What is occurring or might occur that affects the health of our community or the local public health system?

* What specific threats or opportunities are generated by these occurrences?

Forces That Influence Health and the Quality of Life in the Community

* **Trends are patterns over time,** such as migration in and out of a community or a growing elderly population.

* **Factors are discrete elements,** such as a community's large college-age population.

* **Events are one-time occurrences,** such as a natural disaster, or the passage of new legislation.

Community Health Improvement Plan (2013)

Four Priorities:

* Access to care

* Behavioral Health

* Injury Prevention

* Chronic Disease Prevention

MAPP Timeline/Process

LLCHD MAPP Phase/Description of Activity	2015					
	April	**May**	**June**	**July**	**August**	**Sept**
4 MAPP Assessments					CHIP	CHIP
Community Themes & Strengths Assessment	▓	▓	▓	▓		
Hold community dialogues and focus groups		▓	▓	▓		
Develop/disseminate/collect community survey	▓	▓				
Conduct interviews with residents/key leaders		▓	▓	▓		
Compile results/identify challenges and opportunities		▓	▓			
Public Health System Assessment		▓	▓			
Prepare to update LPHSA/establish subcommittee		▓				
Respond to performance measures instrument			▓			
Discuss results/identify challenges and opportunities			▓			
Community Health Status Assessment	▓	▓	▓	▓	▓	▓
Conduct data collection of core indicators	▓	▓	▓			
Select and collect additional indicators as needed		▓	▓	▓	▓	▓
Forces of Change Assessment			▓	▓		
Prepare for the Forces of Change Assessment			▓			
Hold brainstorming session with committee			▓			
Simplify list/identify threats and opportunities			▓	▓	▓	▓

Questions?